FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMESSION AIL Processing Washington, D.C. 20549

Section

OMB Number: 3235-0076

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FORM D

NOTICE OF SALE OF SECURITIES Signon, DC PURSUANT TO REGULATION D, 110 SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

SE	C USE ONLY
Prefix	Serial .
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DA	TE RECEIVED

CIVIT OR AT LIMITED OF LIMITO EXEM	
Name of Offering (check if this is an amendment and name has changed, and indicate change.)	
Private Placement Memorandum-Promissory Notes	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	□ nr(
Type of Filing.	A SERVICE PROPERTY OF THE SERVICE AND A SERVICE AND A SERVICE OF THE SERVICE OF T
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	COOM STATEOUR TRANSPORT AND STATE ST
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	08060260
Fairway Fund IV, LLC	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
6650 SW Redwood Lane, Portland, OR 97224	503-906-9100
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Inches 18 Eta Code)
Brief Description of Business	OCT 0 2 2008
real estate loans	DO. DELITEDS
	THOMSON REUTERS
Type of Business Organization	
corporation limited partnership, already formed other (p	please specify): limited liability company
Month Year	
	mated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State	
CN for Canada; FN for other foreign jurisdiction)	
GENERAL INSTRUCTIONS	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D of 77d(6).	or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given b which it is due, on the date it was mailed by United States registered or certified mail to that address.	
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20	549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually photocopies of the manually signed copy or bear typed or printed signatures.	y signed. Any copies not manually signed must be
Information Required: A new filing must contain all information requested. Amendments need only repo thereto, the information requested in Part C, and any material changes from the information previously supplied with the SEC.	
Filing Fee: There is no federal filing fee.	
State:	
This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for s ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the S are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim fo accompany this form. This notice shall be filed in the appropriate states in accordance with state law. this notice and must be completed.	Securities Administrator in each state where sales r the exemption, a fee in the proper amount shall
ATTENTION-	
Failure to file notice in the appropriate states will not result in a loss of the federal exappropriate federal notice will not result in a loss of an available state exemption unle	

filing of a federal notice.

		A. BASIC ID	ENTIFICATION DATA		
 Each beneficial ow Each executive off 	he issuer, if the iss ner having the pow icer and director of	suer has been organized v er to vote or dispose, or d	within the past five years; irect the vote or disposition f corporate general and ma		a class of equity securities of the issuer partnership issuers; and
Check Box(es) that Apply:	Promoter	■ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i Fairway America, LLC	f individual)	· · · · · · · · · · · · · · · · · · ·			
Business or Residence Addre		Street, City, State, Zip C	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip C	Code)		
Check Box(es) that Apply:	Promoter .	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip C	Code)	<u> </u>	•
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip C	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip C	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ess (Number and	Street, City, State, Zip C	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)		••••		
Business or Residence Addre	ss (Number and	Street, City, State, Zip C	Code)		
	(Use blan	nk sheet, or copy and use	e additional copies of this s	sheet, as necessary)	

			· · · · · · · · · · · · · · · · · · ·		B. II	NFORMATI	ON ABOU	T OFFERI	NG				
1.	Hae the	icener cold	l, or does th	ie iccuer ir	stend to se	ll to non-a	ocredited i	nvestors in	this offeri	no?		Yes	No ⊠
1.	mas inc	issuer sore	i, or does in			Appendix,						B	2
2.	What is	the minim	um investm					_			•••••	\$_50,	00.00
						•	•					Yes	No
3.		Does the offering permit joint ownership of a single unit?								K			
4.	commissible of states	sion or sim on to be lis s, list the na	ilar remune ted is an ass	ration for s ociated pe roker or de	olicitation rson or age aler. If mo	of purchase int of a brok ore than five	ers in conne er or deale e (5) persor	ection with r registered ns to be list	sales of sec I with the S ed are asso	curities in the EC and/or	irectly, any he offering. with a state ons of such		
Ful	l Name (l	Last name	first, if indi	vidual)									
Bu	siness or	Residence	Address (N	umber and	l Street, Ci	ty, State, Z	(ip Code)					<u> </u>	

Na	me of Ass	sociated Br	oker or Dea	aler									
Sta	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit l	Purchasers						
	(Check	"All States	" or check	individual	States)	*********	***************		************			☐ Al	l States
	AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Ful	ll Name (Last name	first, if indi	vidual)	-	· · ·	-						
Bu	siness or	Residence	Address (N	Number an	d Street, C	Sity, State, 2	Zip Code)						
Na	me of Ass	sociated Br	oker or De	aler	<u> </u>								
Sta	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	or check	individual	States)			••••••	***************************************	***************************************			l States
	AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Ful	ll Name (Last name	first, if indi	ividual)									
Bu	siness or	Residence	Address (1	Number an	d Street, C	City, State, 2	Zip Code)					-	
Na	me of Ass	sociated Bi	oker or De	aler		-							
Sta	tes in Wh	ich Person	Listed Has	s Solicit e d	or Intends	to Solicit	Purchasers						
	(Check	"All States	or check	individual	States)	4111*************	······································	••••••				☐ Al	l States
	IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	20,000,000.00	\$_15,617,000.00
	Equity		
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	5	\$
	Partnership Interests	§	\$
	Other (Specify)	<u> </u>	\$
	Total	20,000,000.00	\$ 15,617,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	73	\$ 15,617,000.00
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs	··················	\$
	Legal Fees		\$_100,000.00
	Accounting Fees		\$
	Engineering Fees		s
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)		\$
	Total		\$_100,000.00

	C. OFFERING PRICE, NUM	BER OF INVESTORS, EXPENSES AND USE OF	PROCEEDS	
	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C—proceeds to the issuer."	Question 4.a. This difference is the "adjusted gross	5	19,900,000.00
5.	Indicate below the amount of the adjusted gross preeach of the purposes shown. If the amount for archeck the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Par	ny purpose is not known, furnish an estimate and f the payments listed must equal the adjusted gross	I	
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees			
	Purchase of real estate		\$. 🗆 \$
	Purchase, rental or leasing and installation of madand equipment	chinery	□ ¢	□ \$
	• •			
	Construction or leasing of plant buildings and fac			_ 📙 🦫
	Acquisition of other businesses (including the valoffering that may be used in exchange for the ass			
	issuer pursuant to a merger)		\$	
	Repayment of indebtedness			
	Working capital		\$	19,900,000.0
	Other (specify):			
			\$	\$
	Column Totals		□ \$ <u>0.00</u>	/ \$ 19,900,000.0
	Total Payments Listed (column totals added)		_	9,900,000.00
├		D. FEDERAL SIGNATURE	<u> </u>	
şig	e issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to fu information furnished by the issuer to any non-acc	rnish to the U.S. Securities and Exchange Commi	ssion, upon writte	ule 505, the following en request of its staff,
1	ier (Print or Type) irway Fund IV, LLC	Signature HB Brothe	Date September 18,	2008
Ņa	me of Signer (Print or Type)	Title of Signer (Print or Type)		
Fai	way America, LLC, Member and Manager	JOHN L.B. BROOKE, Chief Executive Office	r of Member and	Manager
		,		
	•			
\perp	· · · · · · · · · · · · · · · · · · ·	ATTENTION	<u>-</u>	

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE			_
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No Z	

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature Date
Fairway Fund IV, LLC	John John September 18, 2008
Name (Print or Type)	Title (Print or Type)
Fairway America, LLC, Member and Manager	JOHN L.B. BROOKE, Chief Executive Officer of Member and Manager

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX 2 3 4 5 1 Disqualification under State ULOE Type of security Intend to sell and aggregate (if yes, attach Type of investor and explanation of to non-accredited offering price waiver granted) offered in state amount purchased in State investors in State (Part E-Item 1) (Part C-Item 2) (Part B-Item 1) (Part C-Item 1) Number of Number of Non-Accredited Accredited Investors **Investors** Yes No State Yes No Amount Amount ΑL ΑK ΑZ AR Promissory Note/\$975,000 CA ✓ 2 975,000 0 CO CTDE DC Promissory FL 50,000 0 Note/\$50,000 GA HI ID IL ſΝ IA KS KY LA ME MD MA MI MN MS

APPENDIX

1		2	3		4					
	to non-a	to sell accredited is in State a-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				ification ate ULOE attach ation of granted)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
МО										
МТ										
NE										
NV		/	Promissory Note/\$768,000	2	768,000	0	··· <u> </u>		✓	
NH										
NJ										
NM										
NY		✓	Promissory Note/\$50,000	1	50,000	0			/	
NC			<u>.</u>							
ND		✓	Promissory Note/\$128,000	1	128,000	0			\ \	
ОН								·		
ОК										
OR		/	Promissory Note/\$9,274,000	51	9,274,000	0			\	
PA										
RI										
sc										
SD										
TN							·			
TX										
UT							 			
VT										
VA					_					
WA		✓	Promissory Note/\$4,372,000	15	4,372,000	0			1	
wv							<u> </u>			
WI						i				

				APP	ENDIX				
1		2	3			5 Disqualification			
	to non-a investor	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State			under St (if yes, explan waiver	ate ULOE attach ation of granted) -Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	. Yes	No
WY									
PR									

